

ISSUE STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NUR		12-04-01
O.I.P.E. CLASSIFIER		12	12/17
FORMALITY REVIEW	JK	835	01/24/02
RESPONSE FORMALITY REVIEW	A.T	1071	04/18/02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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50-04-19-06  
12/5/12